

# CLAIMS ONLY

SERIAL NO. *69933991* FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7		/				
8		/				
9		/				
10	/					
11		/				
12		/				
13		/				
14		/				
15		/				
16		/				
17	/					
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27		/				
28		/				
29		/				
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31		/				
32	/					
33		/				
34		/				
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37		/				
38		/				
39		/				
40		/				
41	/					
42		/				
43		/				
44		/				
45		/				
46		/				
47		/				
48	/					
49		/				
50		/				
TOTAL IND.	9		↓		↓	↓
TOTAL DEP.	58		←	←	←	←
TOTAL CLAIMS	67					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		/				
52		/				
53		/				
54		/				
55		/				
56		/				
57		/				
58		/				
59		/				
60		/				
61		/				
62		/				
63		/				
64		/				
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92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.			↓		↓	
TOTAL DEP.			←	←	←	←
TOTAL CLAIMS						